

STATE OF MAINE

DISTRICT COURT

Location \_\_\_\_\_

Docket No. \_\_\_\_\_

\_\_\_\_\_  
Plaintiff

v.

CARES ACT AND FEDERAL  
PROGRAMS VERIFICATION FOR  
FORCIBLE ENTRY AND DETAINER

\_\_\_\_\_  
Defendant(s)

*Instructions:*

- This Verification form provides the court information related to temporary requirements imposed by the federal Coronavirus Aid, Relief, and Economic Security (CARES) Act, 15 U.S.C. §§ 9056-9058, and federal agencies and programs on certain eviction actions on any “covered dwelling” or property otherwise subject to federal prohibitions on eviction actions.
- This Verification form must be completed and returned to the clerk along with the complaint in any eviction filed between March 18, 2020 until further order of the Maine Supreme Judicial Court. If plaintiff has already filed a complaint, this Verification form must be returned to the clerk before further court proceedings.
- This Verification form must be notarized.
- Remote notarization is allowed pursuant to Executive Order 37, dated April 8, 2020. Please speak with an attorney if you are unsure how to have a document notarized remotely.
- **Failure to return this Verification form to the court may result in a dismissal of your action.**

*If you do not understand how to complete this form, or if you are unsure whether you should use this form, you should speak with an attorney.*

I CERTIFY THE FOLLOWING:

1. This eviction is based on a landlord-tenant relationship: ☐ YES ☐ NO
2. The property involved in this matter is subject to the following federal programs:  
(Check each that applies, if any)
  - A. ☐ Section 8 Housing Voucher (42 U.S.C. 1437(f))
  - B. ☐ Section 8 tenant-based and project-based housing (42 U.S.C. 1437(d), 1437(f))
  - C. ☐ Supportive Housing for the Elderly (12 U.S.C. 1701(q))
  - D. ☐ Supportive Housing for Persons with Disabilities (42 U.S.C. 8013)
  - E. ☐ Housing Opportunities for Persons with AIDS (HOPWA) (42 U.S.C. 12901 et seq.)
  - F. ☐ McKinney-Vento Homeless Assistance Act Housing (42 U.S.C. 11360 et seq.)
  - G. ☐ HOME Investment Partnership (42 U.S.C. 12741 et seq.)
  - H. ☐ Below-market Interest Rate Mortgage Insurance (BMIR) (12 U.S.C. 1715l(d)(3))

**ADA Notice:** The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation contact the Court Access Coordinator, [accessibility@courts.maine.gov](mailto:accessibility@courts.maine.gov), or a court clerk.  
**Language Services:** For language assistance and interpreters, contact a court clerk or [interpreters@courts.maine.gov](mailto:interpreters@courts.maine.gov).

- I. ☐ National Housing Act section 236 multifamily rental housing (12 U.S.C. 1715z-1)
- J. ☐ USDA Rural Development Voucher (42 U.S.C. 1490(r))
- K. ☐ USDA Rural Rental Housing (Section 515) (42 U.S.C. 1485)
- L. ☐ USDA Farm Labor Housing (Sections 514/516) (42 U.S.C. 1484/1486)
- M. ☐ Rural Housing Preservation Grant (HPG) (Section 533) (42 U.S.C. 1490(m))
- N. ☐ USDA Multifamily Housing Loan Guarantee (Section 538) (42 U.S.C. 1490p-2)

3. The property involved in this matter has a mortgage that is in whole or in part guaranteed, insured, supplemented, or assisted in any way by the following federally connected entities:  
(Check each that applies, if any)

- A. ☐ Federal Housing Administration (FHA)
- B. ☐ Veterans Administration (VA)
- C. ☐ United States Department of Agriculture (USDA) direct loan
- D. ☐ United States Department of Agriculture (USDA) guaranteed loan
- E. ☐ Federal Home Loan Mortgage Corporation (Freddie Mac)
- F. ☐ Federal National Mortgage Association (Fannie Mae)
- G. ☐ an office or agency of the Federal Government
- H. ☐ a housing or urban development program administered by the Secretary of Housing and Urban Development

4. I received a mortgage forbearance on the property involved in this matter between March 18, 2020 and December 31, 2020:

*Complete this section only if you checked a box or boxes in section 3 above.*

☐ YES ☐ NO ☐ Not applicable

5. I received a mortgage forbearance on the property involved in this matter between the following dates:

*Complete this section only if you checked "YES" in section 4 above.*

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6. Additional information:

*Additional information may also be provided to the court at the time of the hearing.*

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#### ATTORNEY HELP

- A. ☐ No attorney helped me prepare or fill in this form.
- B. ☐ An attorney helped me prepare or fill in this form.

If you checked B, you must fill in the following information:

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Name of attorney or organization providing assistance, if any

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Business address of attorney or organization

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\_\_\_\_\_  
City State ZIP Code  
(\_\_\_\_\_) \_\_\_\_\_  
Phone number Email address

OATH AND SIGNATURE

I, \_\_\_\_\_, (*print or type name*) have read this Verification, and I certify under penalty of perjury and pursuant to the laws of the State of Maine that the information I have provided in this verification is true and correct.

\_\_\_\_\_, 20\_\_\_\_\_  
Month Day Year Signature

\_\_\_\_\_  
Mailing address

\_\_\_\_\_  
City State ZIP Code  
(\_\_\_\_\_) \_\_\_\_\_  
Phone number Email address

State of Maine  
County of \_\_\_\_\_

Personally appeared the above-named affiant and made oath to the foregoing instrument.

Date: \_\_\_\_\_

\_\_\_\_\_  
Notary Public/Attorney at Law

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